tion Functional Classification. 9. Significant screening ECG abnormalities including left bundle branch block, 2nd degree AV block type II, 3rd degree block, bradycardia, and QTc >470 msec. 10. Any serious medical condition, laboratory abnormality, or psychiatric illness that places the subject at unacceptable risk if he/she were to participate in the study. 11. History of stroke or cerebral hemorrhage within 6 months. 12. Evidence of bleeding diathesis or coagulopathy. 13. Major surgical procedure, open biopsy, or significant traumatic injury within 28 days prior to Day 1, anticipation of need for major surgical procedure during the course of the study. 14. Minor surgical procedures, fine needle aspirations or core biopsies within 7 days prior to Day 1. Bone marrow aspiration and/or biopsy are allowed. 15. Serious, non-healing wound, ulcer, or bone fracture. 16. Treatment with Coumadin. Patients who recently received Coumadin must be off Coumadin for at least 7 days prior to start of the study. 17. Any chemotherapy (e.g., bendamustine, cyclophosphamide, pentostatin, or fludarabine), immunotherapy (e.g., alemtuzumab, or ofatumumab), bone marrow transplant, experimental therapy, or radiotherapy is prohibited during therapy on this study. 18. Use of medications known to prolong QTc interval or that may be associated with Torsades de Pointes (refer to Appendix F) are prohibited within 7 days of starting study drug and during study-drug treatment.

The examples and embodiments described herein are illustrative and various modifications or changes suggested to persons skilled in the art are to be included within this disclosure. As will be appreciated by those skilled in the art, the specific components listed in the above examples may be replaced with other functionally equivalent components, e.g., diluents, binders, lubricants, fillers, and the like.

What is claimed is:

1. A solid tablet formulation comprising

a. ibrutinib, and

b. one or more pharmaceutically acceptable excipients,

wherein the ibrutinib is present in an amount of at least about 50% w/w, and

wherein oral administration of one or more tablet(s) of the solid tablet formulation in an amount sufficient to deliver 560 mg of ibrutinib to a population of healthy human adults in a fasted state results in a mean $AUC_{0-\infty}$ of about 465 ng*h/ml+/−248 ng*h/ml.

2. The solid tablet formulation of claim **1**, wherein the ibrutinib is present in an amount of at least about 60% w/w.

3. The solid tablet formulation of claim **1**, comprising 420 mg of ibrutinib.

4. The solid tablet formulation of claim **1**, further comprising a surfactant.

5. The solid tablet formulation of claim **1**, wherein the ibrutinib is present in micronized form.

6. The solid tablet formulation of claim **5**, further comprising a surfactant.

7. The solid tablet formulation of claim **5**, wherein the particle size of micronized ibrutinib is about or less than 30 micron.

8. The solid tablet of claim **7**, further comprising a surfactant.

9. A solid tablet formulation comprising

a. 560 mg of ibrutinib, and

b. one or more pharmaceutically acceptable excipients,

wherein the ibrutinib is present in an amount of at least about 50% w/w, and

wherein oral administration of the solid tablet formulation to a population of healthy human adults in a fasted state results in a mean $AUC_{0-\infty}$ of about 465 ng*h/ml+/−248 ng*h/ml.

10. The solid tablet formulation of claim **9**, wherein the ibrutinib is present in an amount of at least about 60% w/w.

11. The solid tablet formulation of claim **9**, further comprising a surfactant.

12. The solid tablet formulation of claim **9**, wherein the ibrutinib is present in micronized form.

13. The solid tablet formulation of claim **12**, further comprising a surfactant.

14. The solid tablet formulation of claim **12**, wherein the particle size of micronized ibrutinib is about or less than 30 micron.

15. The solid tablet formulation of claim **14**, further comprising a surfactant.

16. The solid tablet formulation of claim **12**, wherein the particle size of micronized ibrutinib is about or less than 10 micron.

17. A solid tablet formulation comprising

a. 560 mg of micronized ibrutinib having a particle size of about or less than 10 micron,

b. a surfactant, and

c. one or more additional pharmaceutically acceptable excipients,

wherein the ibrutinib is present in an amount of at least about 50% w/w, and

wherein oral administration of the solid tablet formulation to a population of healthy human adults in a fasted state results in a mean $AUC_{0-\infty}$ of about 465 ng*h/ml+/−248 ng*h/ml.

18. The solid tablet formulation of claim **1**, comprising 140 mg of ibrutinib.

19. The solid tablet formulation of claim **1**, comprising 280 mg of ibrutinib.

20. The solid tablet formulation of claim **1**, comprising 560 mg of ibrutinib.

21. The solid tablet formulation of claim **1**, wherein the solid tablet formulation has pharmaceutically acceptable stability.

22. The solid tablet formulation of claim **9**, wherein the solid tablet formulation has pharmaceutically acceptable stability.

23. The solid tablet formulation of claim **17**, wherein the solid tablet formulation has pharmaceutically acceptable stability.

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